

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF Kevin Gallagher	COURT CASE NUMBER 08C1424
DEFENDANT Public Defender of DuPage County, et al.	TYPE OF PROCESS S/C
SERVE NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Robert A. Miller PUBLIC DEFENDERS OFFICE	
ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code) 505 N. COUNTY FARM RD. WHEATON, ILL. 60187, P.D. OFFICE	
AT	

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

Kevin Gallagher
1450 Joliet Street
Dyer, IN 46311

Number of process to be served with this Form - 285	1
Number of parties to be served in this case	4
Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include, but not limited to, Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):
Fold

FILED

JUN 12 2008 YM
6-12-2008

Signature of Attorney or other Originator requesting service on behalf of:

MICHAEL W. LINDENBARGER
CLERK U.S. DISTRICT COURT
☐ PLAINTIFF
☐ DEFENDANTDATE
03-24-08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY -- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 4 of 4	District of Origin No. 24	District to Serve No. 24	Signature of Authorized USMS Deputy or Clerk	Td	Date 03-24-08
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I hereby certify and return that I have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

JASON HARVEY INVESTIGATOR

Address (complete only if different than shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.Date of Service
6/3/08 Time
3:21 am

Signature of U.S. Marshal or Deputy

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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One Service Fee Charged same case + location.
REMARKS: See process sheet # 1 for charges.

1 OUSM
2 HOURS
60 miles RT